



ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	NO.	DATE
FEE DETERMINATION	J.G.		11/2/94
O.I.P.E. CLASSIFIER		7/2	
FORMALITY REVIEW	EW	64934	11/2/98

INDEX OF CLAIMS

✓ ..... Rejected  
= ..... Allowed  
- (Through numeral) Canceled  
+ ..... Restricted

N ..... Non-elected  
I ..... Interference  
A ..... Appeal  
O ..... Objected

Claim	Final	Original	Date
1	✓	✓	11/3/02
2	✓	✓	5/5/02
3	✓	✓	5/13/02
4	✓	✓	5/13/02
5	✓	✓	5/13/02
6	✓	✓	5/13/02
7	✓	✓	5/13/02
8	✓	✓	5/13/02
9	✓	✓	5/13/02
10	✓	✓	5/13/02
11	✓	✓	5/13/02
12	✓	✓	5/13/02
13	✓	✓	5/13/02
14	✓	✓	5/13/02
15	✓	✓	5/13/02
16	✓	✓	5/13/02
17	✓	✓	5/13/02
18	✓	✓	5/13/02
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20	✓	✓	5/13/02
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22	✓	✓	5/13/02
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here